SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 30 OF 79 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Association of Nurse Anesthetists Separate Segregated Fund (CRNA-PAC) Full Name (Last, First, Middle Initial) Joanne K. Heins Date of Receipt Mailing Address 398 Otsego Ct 2015 25 City Zip Code State Transaction ID: A3392E3D65624370A138 NV Henderson 89012-4862 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation CRNA self employed Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Patti A. Hendrix Date of Receipt Mailing Address PO Box 8690 09 02 2015 City State Zip Code Transaction ID: C650DD056E52462D98EE ΑK Kodiak 99615-8690 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Providence Kodiak Island Medical Cente **CRNA** Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Jody L. Heriot Date of Receipt Mailing Address PO Box 22099 12 2015 City State Zip Code Transaction ID: F53811B512C94F66AB91 FL Fort Lauderdale 33335-2099 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation **CRNA MEDNAX** Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 515.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....